

STATE OF ILLINOIS
IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT
MCLEAN COUNTY – IN PROBATE

In the Matter of the Estate of _____

)
)
)

No. _____

A Disabled Person

Hearing on petition set for _____, _____, m., Room _____ County Courthouse _____, Illinois _____ (Judge)

PETITION FOR GUARDIAN

_____, a reputable citizen of Illinois, on oath states:

1. _____, whose place of residence is _____
(Address)

(City) (County) (State)
whose date of birth is _____,

_____ is disabled and incapable of managing his _____
(Estate)
_____ because
(Person, or Estate and Person)

2. Approximate value of the personal estate.....\$ _____

Anticipated gross annual income and other receipts.....\$ _____

3. The names and post-office addresses of his nearest adult relatives are: (List spouse and children; if none, parents, brothers and sisters; if none (nearest kindred)

Name	Relationship	Post-office Address

<p style="text-align: center;">*If alleged disabled person is a nonresident add “owning real estate in this county” or “owning no real estate in Illinois but owning personal estate in the county.”</p>
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Petitioner asks that:

(a) _____ be adjudged as a disabled person;

Petitioner asks that:

(a) _____
(Name) (Address) (City and State)

(if an individual add) age _____ years, _____, qualified and willing to act,
(Occupation)

be appointed as guardian of the _____
(Estate and / or Estate and Person)

of the disabled person;

(b) _____
(Name) (Address)

_____, age _____ years, _____,

qualified and willing to act, be appointed as guardian of the person of the disabled person; and

(c) _____ authorization to appraise goods and chattels issue to the following, qualified to act
(an or no)

Signed and sworn to before me

_____, _____

(Notary Public)

(Petitioner)

(Address)

(City)

Name _____

Attorney for Petitioner _____

Address _____

City _____

Telephone _____

STATE OF ILLINOIS
IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT
COUNTY OF MCLEAN

IN THE INTERST OF

No. _____

Respondent

**REPORT
ON PETITION FOR APPOINTMENT OF GUARDIAN**

The Undersigned, on oath state:

1. The nature and type of disability of the Respondent, _____
and impact of disability on Respondent's ability to make decisions or to function independently is:

2. My / our evaluations of Respondent's mental, physical, and educational condition, adaptive behavior, and social skills are:

These evaluations are based upon examination of Respondent on _____
(Date)

3. In my / our opinion plenary / limited guardianship, both of the person and of the estate of Respondent, is needed because:

4. I / we recommend, as the most appropriate treatment or habilitation plan and living arrangement for Respondent:

The reasons for this recommendation are:

5. Signature (s) of Person (s) performing evaluations (one of whom must be a licensed physician):

Licensed by the State of Illinois as _____

License No. _____

State of Illinois

SS.

County of McLean

Subscribed and sworn to before me this _____ day of _____, _____

Attorney for Petitioner: _____

Address: _____

City: _____

Telephone: _____

Notes: 755 ILCS 5/11a

Sec. 11a-1. **Developmental disability defined.** "Developmental disability" means a disability which is attributable to: (a) mental retardation, cerebral palsy, epilepsy or autism; or to (b) any other condition which results in impairment similar to that caused by mental retardation and which requires services similar to those required by mentally retarded persons. Such disability must originate before the age of 18 years, be expected to continue indefinitely, and constitute a substantial handicap.

Sec. 11a-2. **"Disabled person" defined.** "Disabled person" means a person 18 years or older who (a) because of mental deterioration or physical incapacity is not fully able to manage his person or estate, or (b) is a person with mental illness or a person with a developmental disability and who because of his mental illness or developmental disability is not fully able to manage his person or estate, or (c) because of gambling, idleness, debauchery or excessive use of intoxicants or drugs, so spends or wastes his estate as to expose himself or his family to want or suffering.

Sec. 11a-9. **Report.** (a) The petition for adjudication of disability and for appointment of a guardian should be accompanied by a report which contains (1) a description of the nature and type of the respondent's disability and an assessment of how the disability impacts on the ability of the respondent to make decisions or to function independently; (2) an analysis and results of evaluations of the respondent's mental and physical condition and, where appropriate, educational condition, adaptive behavior and social skills, which have been performed within 3 months of the date of the filing of the petition; (3) an opinion as to whether guardianship is needed, the type and scope of the guardianship needed, and the reasons therefor; (4) a recommendation as to the most suitable living arrangement and, where appropriate, treatment or habilitation plan for the respondent and the reasons therefor; (5) the signatures of all persons who performed the evaluations upon which the report is based, one of whom shall be a licensed physician and a statement of the certification, license, or other credentials that qualify the evaluators who prepared the report.

CIRCUIT COURT OF _____
JUDICIAL CIRCUIT, ILLINOIS

_____ COUNTY, IN PROBATE

Estate of _____) [Docket]
_____) No. _____
_____) [Page]

OATH OF OFFICE

I, _____, on oath state that I will discharge faithfully the
duties of the office of _____

Signed and sworn to before me

_____, _____

(Notary Public)

Name _____

Attorney For _____

Address _____

City _____

Telephone _____

STATE OF ILLINOIS
IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT
MCLEAN COUNTY – IN PROBATE

In the Matter of the Estate of _____)
_____) No. _____
_____)
A Disabled Person

ORDER OF ADJUDICATION OF DISABILITY AND APPOINTING GUARDIAN

On the verified petition of _____

a reputable citizen of this state, for the appointment of a guardian of the _____ of
(Estate and / or Person)
_____, whose residence is _____

(For Non-Resident of Illinois, Insert: owning real estate in this county or owning no real estate in Illinois but owning personal estate in this county)

the court finds: (1) summons has been served upon the alleged disabled person at least 14 days before the return day designated therein by leaving a copy thereof with him personally and informing him of its contents, (2) no party has demanded a jury, (3) and _____
qualified and willing to act, has presented _____

(Insert: his bond in the penal sum of \$ _____ or its acceptance of office)

Having considered the evidence, the court adjudges that _____
is a disabled person as defined in Section 11a-2 of the Probate Act, and that a guardian should be appointed for his

_____.
(Estate and / or Person)

It is ordered that _____ is appointed guardian
of the _____ of _____, a disabled person,
(Estate and/or Person)
that the _____ is approved and that letters of guardianship issue upon filing of the oath.
(acceptance or bond)

Dated _____, _____

ENTER:

(Judge)

Name _____

Attorney For _____

Address _____

City _____

Telephone _____